

IN THE UNITED STATES DISTRICT COURT FOR THE
MIDDLE DISTRICT OF ALABAMA

DIVISION

2007 NOV 13 A 10:46

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Ricky Wade Murphree)

Plaintiff(s))

v.)

State of Alabama, et al.)

Defendant(s))

2:07 CV 832-MHT

MOTION TO PROCEED IN FORMA PAUPERISPlaintiff(s) Ricky Wade Murphree

moves this Honorable Court for an order allowing her/him to proceed in this case without prepayment of fees, costs, or security therefor, and for grounds therefor submits the attached sworn affidavit in support of the motion.

Ricky Wade Murphree
Plaintiff(s) signature

AO 240 (Rev. 10/03)

UNITED STATES DISTRICT COURT

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District of _____

2007 NOV 13 A 10:47

Plaintiff

V.

APPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVIT

CASE NUMBER:

2:07 CV 832 - MHT

Defendant

I, Ricky Wade Murphree declare that I am the (check appropriate box)
☒ petitioner/plaintiff/movant ☐ other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC § 1915 I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☐ Yes ☒ No (If "No," go to Part 2)

If "Yes," state the place of your incarceration _____

Are you employed at the institution? _____ Do you receive any payment from the institution? _____

Attach a ledger sheet from the institution(s) of your incarceration showing at least the past six months' transactions.

2. Are you currently employed? ☐ Yes ☒ No
 a. If the answer is "Yes," state the amount of your take-home salary or wages and pay period and give the name and address of your employer.

- b. If the answer is "No," state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

was self employed until 11 years ago, became disabled

3. In the past 12 twelve months have you received any money from any of the following sources?

- | | | |
|---|---|--|
| a. Business, profession or other self-employment | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b. Rent payments, interest or dividends | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| c. Pensions, annuities or life insurance payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| d. Disability or workers compensation payments | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| e. Gifts or inheritances | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| f. Any other sources | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

If the answer to any of the above is "Yes," describe, on the following page, each source of money and state the amount received and what you expect you will continue to receive.

AO 240 Reverse (Rev. 10/03)

about \$ 980.00 monthly social security disability.

4. Do you have any cash or checking or savings accounts?

☒ Yes☐ No

If "Yes," state the total amount.

70.00

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or any other thing of value? ☒ Yes ☐ No

If "Yes," describe the property and state its value.

70,000 where I live. (Not sure of the exact amount)

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support.

Wife - Debbie Murphree

my total amount

son - Brandon Murphree

I receive from

son - Jonathan Murphree

SS Disability
is used for living
expenses

I declare under penalty of perjury that the above information is true and correct.

11-13-07

Date

Ruby Wade Murphree

Signature of Applicant

NOTICE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.